



State of New Jersey
 Department of Environmental Protection
 Division of Fish and Wildlife
 PO Box 400
 Trenton, NJ 08625-0400

COMMERCIAL / SEMI-WILD HUNTING PRESERVE

VERIFICATION OF LEASED PROPERTY

Name of Lessee: _____ Social Security #: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Name of Club: _____

Contact Person: _____

Daytime Telephone: _____ Home Telephone: _____

(Area Code)

(Area Code)

Name of Property Owner (Lessor): _____

Address: _____

City: _____ State: _____ Zip Code: _____

Telephone Number: _____

Location of Leased Property:

Description: _____

Street: _____ City: _____

Township: _____ County: _____

Block / Lot Numbers: _____ Number of Acres: _____

Date Lease Begins: _____ Date Lease Ends: _____

Name of Land Owner (Print)

Signature of Land Owner

Date

**THIS INFORMATION WILL ONLY BE USED BY THE DIVISION OF FISH AND WILDLIFE FOR THE
 PROCESSING OF PERMITS**